

**ATCEMS**  
**Advisory Board Packet**

**November 14, 2012**



**Draft of Minutes**  
**May 2, 2012**



**The Austin – Travis County EMS Advisory Board convened on May 2, 2012, 15 Waller Street, in Austin, Texas at 9:30 a.m.**

**Board Members in Attendance:** Susan Pascoe, Bob Taylor, Paula Barr, Carlos Brown, Paul Carrozza, Hector Gonzales, Vard Curtis

**Board Members Absent:** Mark Clayton

**Other Attendees:** Ernesto Rodriguez, Vivian Holmes, James Shamard, John Ralston, Keith Simpson, Jeff Hayes, Danny Hobby, Terry Browder, Jim Persons, Teresa Gardner, Scott Fernandes, Jose Cabanas, Paul Hinchey, Patrick George, Rick Branning, Gigi Mao, Troy Mayer, Christine Thies

**1. CALL TO ORDER –May 2, 2012**

Chair Taylor called the meeting to order at 9:30 a.m.

Welcome - Dr. Vard Curtis was introduced and welcomed as a new member of the Advisory Board. He fills the role as a physician appointed by the Travis County Judge and Commissioners Court. Dr. Curtis will complete the City of Austin training for new Board Members.

**2. CITIZEN COMMUNICATION: GENERAL - None**

**3. REVIEW AND APPROVAL OF MINUTES**

**Motion: The minutes for the regular meeting of February 1, 2012 were approved on Vice Chair Pascoe's motion, Board Member Barr's second on a 6-0 vote; recusing Dr. Curtis.**

**4. DISCUSSION AND ACTION AS APPROPRIATE ON A RECOMMENDATION IF ANY, TO CITY COUNCIL AND COMMISSIONERS COURT RE: ATCEMS BOARD MEMBERSHIP STRUCTURE.**

Board Members discussed the possibility of reducing the number of board members. This topic was brought up due to the difficult time of forming a quorum.

- Current membership is nine members. The City appoints five members and the County appoints four members. Since there was a strong showing of members at today's meeting, it was agreed to review again at the August 1<sup>st</sup> meeting. A reminder about the importance of attending the meetings was given.

**5. RECEIVE PRESENTATION; DISCUSSION OF PROPOSED FY13 ATCEMS BUDGET; ACTION AS APPROPRIATE.**

- John Ralston reviewed the budget presentation that included review of:
  - Horizon Issues
  - Unmet Needs - Budget requests to City for FY13
  - Budget Process Timeline
  - Currently looking at an on-line payment option to make it easier for patients to pay a bill.
  - Medicare is changing what they will cover for ambulance services.
  - City is looking at a one-stop payment center for all COA payments.
  - Vice-Chair Pascoe recommends consideration of electronic posting of payments.

**6. CONSIDER AND TAKE ACTION ON THE RENEWAL OF THE NON-EMERGENCY MEDICAL TRANSFER FRANCHISE CURRENTLY HELD BY ACADIAN AMBULANCE**

- Mr. Branning provided the presentation. Details included:
  - No regulations exist for a private ambulance service to run in Travis County.
  - The last recommendation from the Advisory Board approving the Acadian Franchise was in 2007 and the current franchise agreement expires October 2012.
  - ATCEMS did the last audit in July 2011 and reviewed their performance and fleet and they are currently in good standing.
  - Acadian has applied for another five-year term; however City Council can set the terms. ATCEMS recommends approval of another five-year term.
  - Troy Mayor, VP of Operations with Acadian to provide the amount of revenue Acadian receives. Once the data is received, Chair Taylor will share with the rest of the board.
  - City Council reviews the ATCEMS fee structure annually during Budget review and they approve the same fee structure for the franchises.
  - Group discussed increasing amount of application fee. Currently, it is set at \$5,000.

Advisory Board members and staff discussed the renewal and the history of ambulance franchises in the City of Austin and other options to consider. It was noted that the board should be reviewing the franchise data annually.

**Motion: Approve Acadian franchise renewal for a one-year term and recommend that ATCEMS provide a report on model structure and the fee. Vice Chair Pascoe and Chair Taylor to send a letter to City Council and Travis County Commissioners. Vice Chair Pascoe motioned, seconded by Board Member Carrozza, motion passed on a 7-0 vote.**

**7. UPDATE ON TRANSPORT UNIT STAFFING RE-CONFIGURATION**

- An update was provided to Board Members by Chief of Staff James Shamard.

- ATCEMS received City Manager's approval to hire Medic 1's.
- The next Academy begins this week with four paramedics and seven Medic 1's.
- There are approximately forty vacant positions and additional hiring processes will take place in the near future.

## **8. REVIEW OF SYSTEM DATA REPORTS FOR FY12 Q2**

- Chief Rodriguez and Dr. Hinchey reviewed reports; board members discussed.

### **a. Receive Information on Coverage Gaps Tracking Metric**

- Chief Rodriguez presented the information.
- The goal is to become one regional system, but there are gaps to fix before that can be done.
  - Presentation of a chart showing comparison of city and county growth.
  - Have been using city ambulances to respond to the county gaps.
  - Half of all calls in county are being responded to by the city; however, the county currently collects funds for these services.
  - A system funding chart was reviewed.
  - Chair Taylor asked what is the net cost per service? Chief Rodriguez has the data and will chart it out.

### **b. ATCEMS EMS Coverage Assessment -- State of the System**

- Chief Shamard reviewed this item.
- Board members discussed the information. It was also noted the possibility of unit turn around time improvement due to additional new hospitals in some of the areas mentioned; staff will assess in the future and see if there is relief from the openings.

## **9. ADJOURN**

Chair Taylor adjourned the meeting at 11:26 a.m., without objection.

# **Performance Report**

## **FY2012 Q3**

# Performance Report

## Period: FY2012 Q3

### Quarter Summary

Calls Received: 31,880

Incidents: 29,173

Responses: 33,539

Patient Contacts: 22,532

Patient Transports: 19,655

Priority 1		Priority 2		Priority 3		Priority 4		Priority 5		
Patients in need of time critical interventions		Patients with conditions that could require time critical interventions		Patients with conditions that are emergent but do not require time critical interventions.		Patients with conditions that are urgent but do not require time critical interventions.		Patients with conditions that are not time sensitive.		
Incidents	2,059	Incidents	8,449	Incidents	4,056	Incidents	10,896	Incidents	3,713	
Responses	2,856	Responses	9,768	Responses	4,490	Responses	12,193	Responses	4,232	
Patient Contacts	1,826	Patient Contacts	7,289	Patient Contacts	1,991	Patient Contacts	8,074	Patient Contacts	3,352	
Patient Transports	1,414	Patient Transports	6,153	Patient Transports	3,271	Patient Transports	6,013	Patient Transports	2,804	
<i>Patient Transport Rate</i>	85.96%	<i>Patient Transport Rate</i>	84.73%	<i>Patient Transport Rate</i>	85.25%	<i>Patient Transport Rate</i>	74.58%	<i>Patient Transport Rate</i>	84.82%	
<b>Response Time Performance</b>										
Urban	(09:59)	Urban	(11:59)	Urban	(13:59)	Urban	(15:59)	Urban	(17:59)	
<i>All Responders</i>	97.54%	<i>All Responders</i>	98.97%	<i>All Responders</i>	99.64%	<i>All Responders</i>	98.78%	<i>All Responders</i>	95.72%	
ATCEMS	90.26%	ATCEMS	95.42%	ATCEMS	97.84%	ATCEMS	98.36%	ATCEMS	95.00%	
Suburban	(11:59)	Suburban	(13:59)	Suburban	(15:59)	Suburban	(17:59)	Suburban	(19:59)	
<i>All Responders</i>	81.33%	<i>All Responders</i>	92.80%	<i>All Responders</i>	95.68%	<i>All Responders</i>	97.42%	<i>All Responders</i>	97.01%	
ATCEMS	63.25%	ATCEMS	76.46%	ATCEMS	83.60%	ATCEMS	94.02%	ATCEMS	88.60%	
<b>System Response Time Indicator</b>					$= \left( \frac{\text{Total On-Time Count}}{\text{Total Incidents}} \right) = 98.11\%$			<b>Overall Patient Transport Rate</b>		81.52%

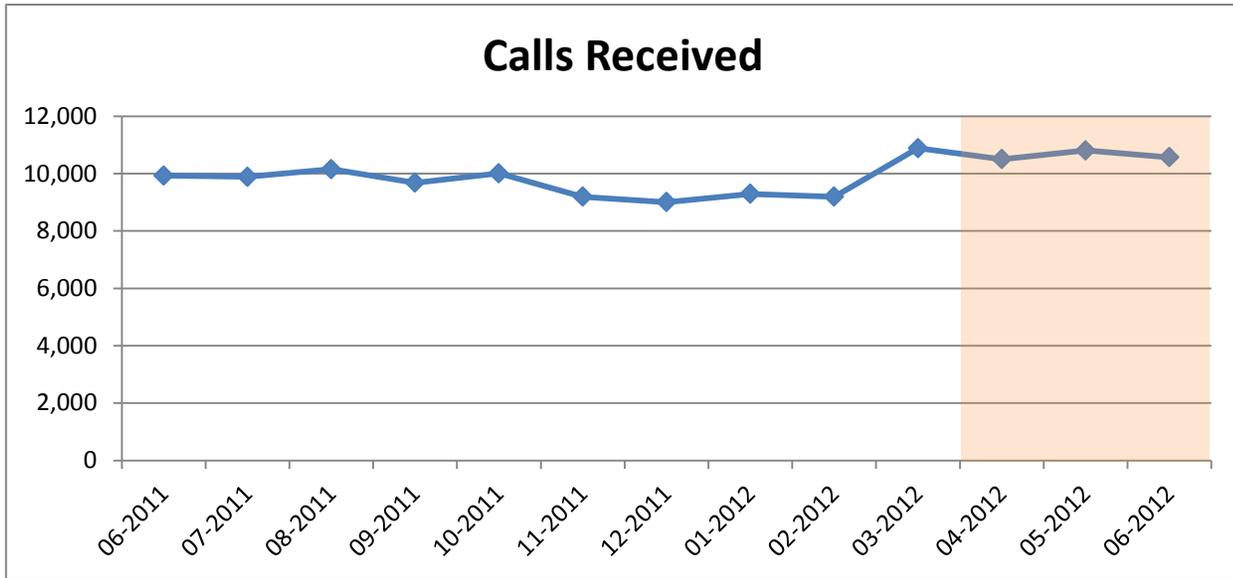
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 3) Stand-bys (Priority 6) and other priority levels are excluded.

This report is prepared by the A/TCEMS Business Analysis and Research Team .  
 Please submit questions or comments at [EMSDataAnalysis@austintexas.gov](mailto:EMSDataAnalysis@austintexas.gov).

# Communications Report

## FY2012 Q3

	Apr-12	May-12	Jun-12
<b>Calls Received</b>	10,502	10,807	10,571



### Overall Compliance with Medical Priority Dispatch Evaluation Criteria

Apr-12	May-12	Jun-12
98.02%	98.27%	98.85%

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## Performance Measure Summary

### STEMI

ST Segment Myocardial Infarction (STEMI) is myocardial Infarction (MI) with an electrocardiographic finding of ST segment elevation. MI is caused by an interruption of blood flow to one or more areas of the heart. The most common cause is a rupture of an atherosclerotic plaque which causes obstruction of coronary vessels. Each year, about 1.5 million people suffer a myocardial infarction. It is the leading causes of death in the United States and kills approximately 500,000 people. In 2010, the CDC estimates that heart disease will cost the United States \$316 billion dollars.

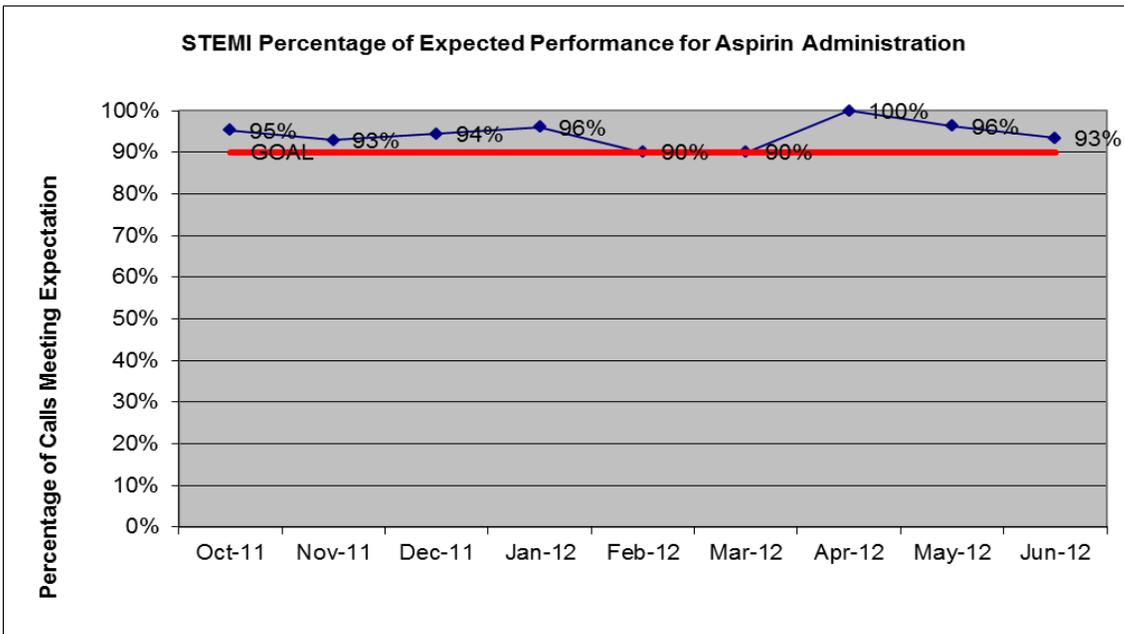
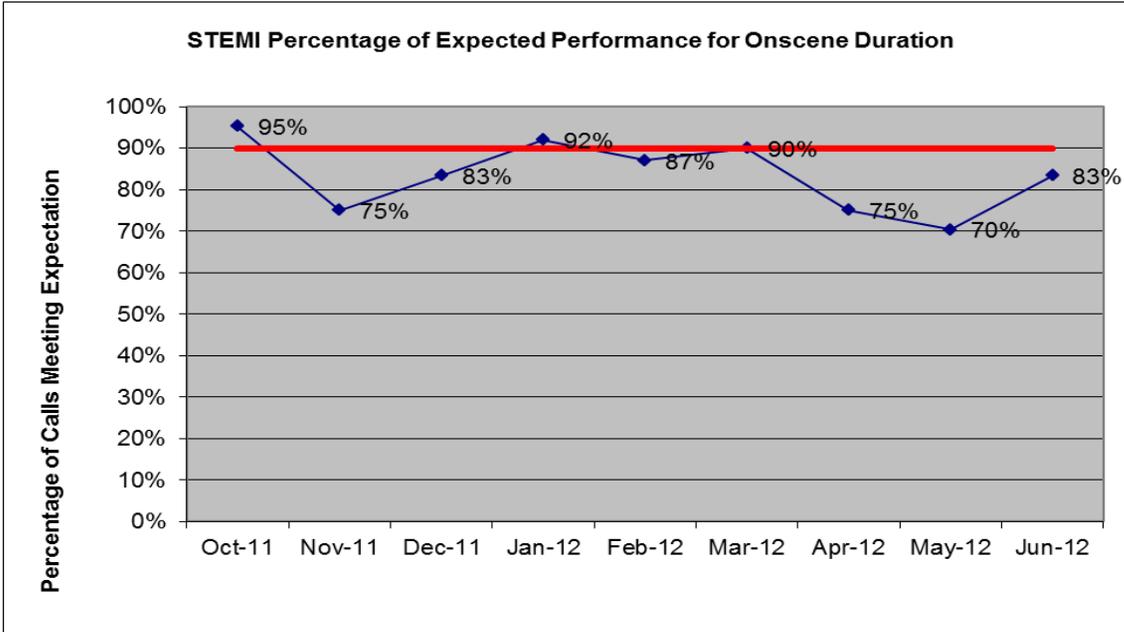
### ATCEMS Performance Measures

- Scene Time Compliance – Goal is 15 minutes
- Aspirin administration

# STEMI Report

## FY2012 Q3

	Apr-12	May-12	Jun-12
Patient Contacts	20	27	30
Scene Time Compliance	75.00%	70.00%	83.00%
ASA Administration	100.00%	96.00%	93.00%



*This report contains working data for internal use only. For official reports please contact the A/TCEMS Business Analysis and Research Team at [EMSDataAnalysis@austintexas.gov](mailto:EMSDataAnalysis@austintexas.gov).*



## Performance Measure Summary

### Stroke

A stroke is the loss of neurologic function due to alterations or disturbances in the blood supply to the brain. When blood flow is stopped for more than a few seconds, brain cells begin to die, causing permanent damage. Each year, about 795,000 people suffer a stroke. It is the third leading cause of death in the United States and kills 143,579 people each year and is the leading cause of serious, long-term disability. The total cost of stroke to the United States is estimated at \$43 billion dollars.

There are two types of stroke:

- Ischemic – Ischemic stroke occurs when a blood vessel becomes obstructed and interrupts blood supply. 87% of strokes are classified as ischemic.
- Hemorrhagic – Hemorrhagic strokes are caused by a ruptured blood vessel or abnormal vasculature. This type of stroke accounts for nearly 30% of all stroke deaths.

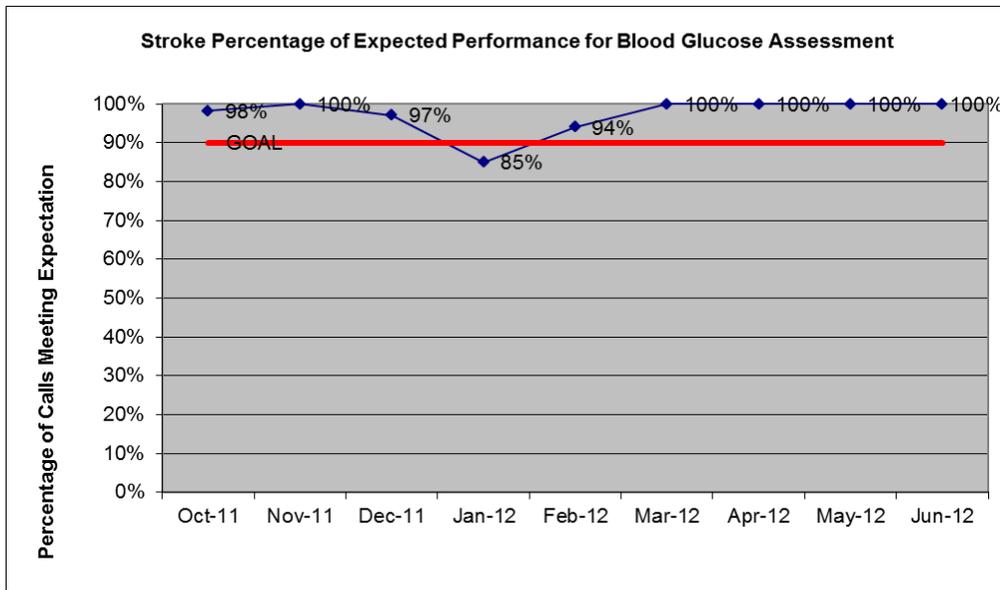
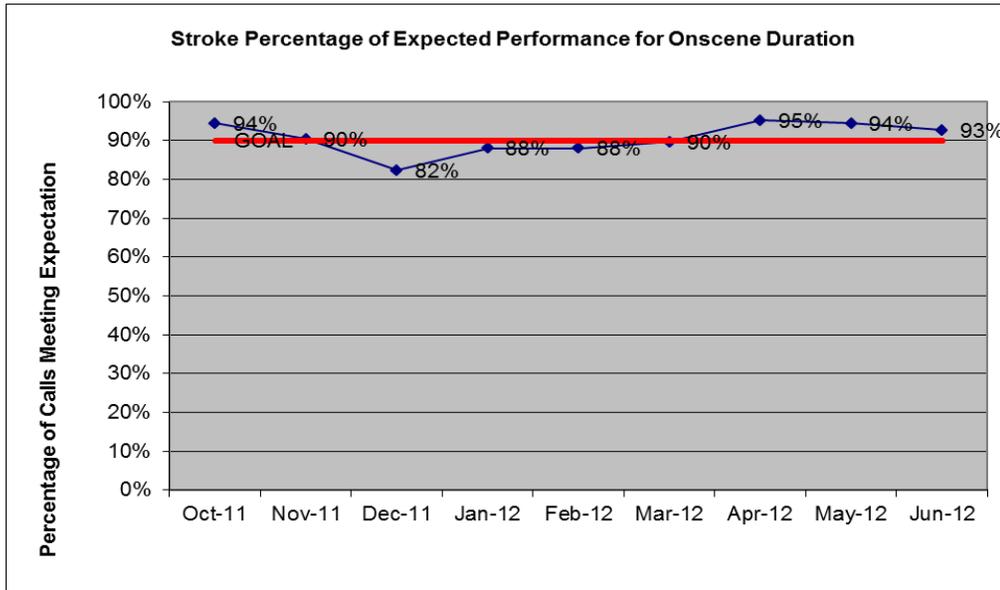
### ATCEMS Performance Measures

- Scene time compliance – Goal is 15 minutes
- Blood glucose assessment

# Stroke Report

## FY2012 Q3

	Apr-12	May-12	Jun-12
Patient Contacts	41	53	54
Scene Time Compliance	95.00%	94.00%	93.00%
BG Determination	100.00%	100.00%	100.00%



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# Performance Measure Summary

## Customer Satisfaction

Exemplary patient care and customer service are two important aspects of the A/TCEMS operational model. One measure of customer satisfaction is the Call to Door interval. The Call to Door interval is the amount of time it takes A/TCEMS to receive a 911 request, dispatch, respond, treat, and transport a patient.

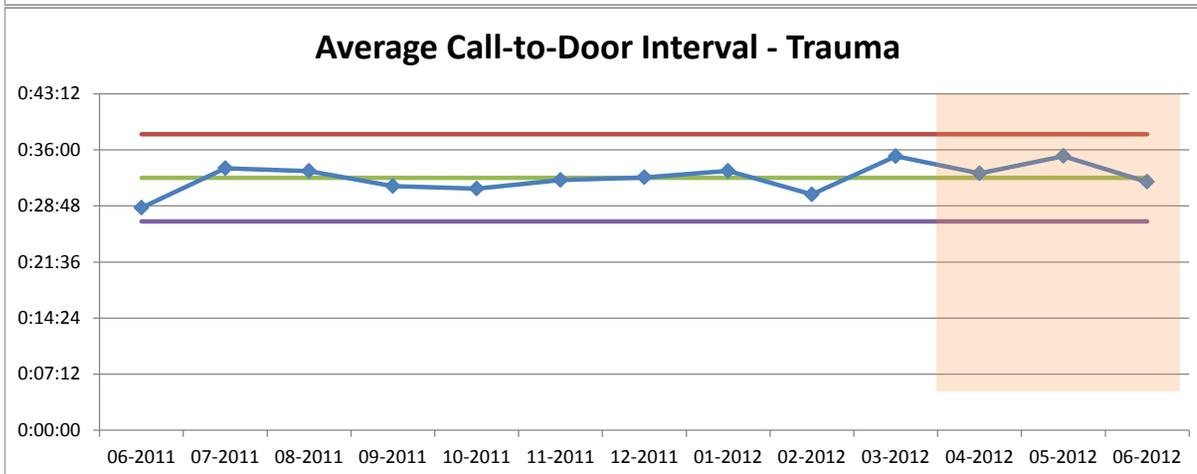
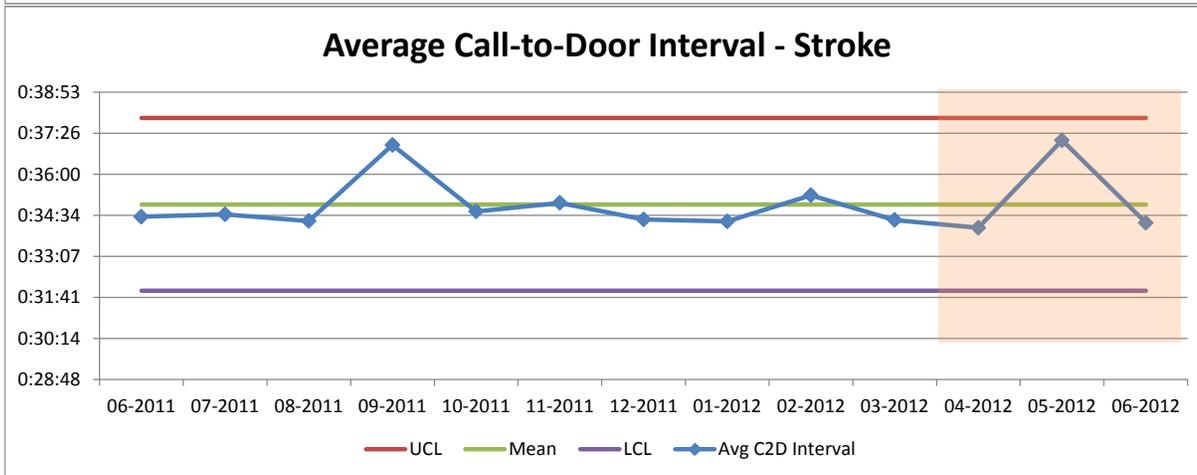
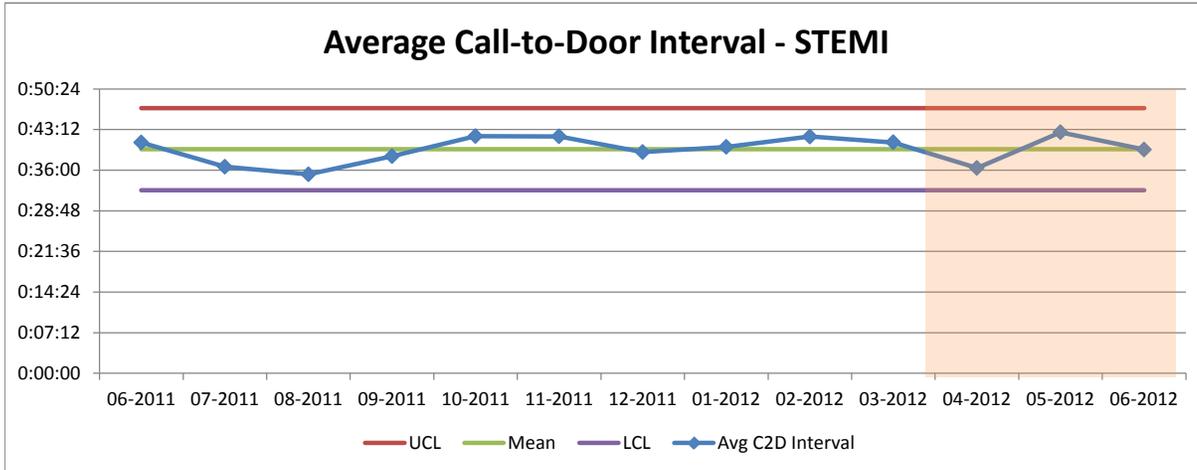
## ATCEMS Performance Measures

- STEMI – Call to door interval
- Stroke – Call to door interval
- Trauma - Call to door interval

# Customer Satisfaction Report

## FY2012 Q3

	Apr-12	May-12	Jun-12
Avg Call to Door Interval - STEMI	0:36:21	0:42:43	0:39:39
Avg Call to Door Interval - Stroke	00:34:07	0:37:11	0:34:17
Avg Call to Door Interval - Trauma	0:32:58	0:35:11	0:31:54



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**FY12 Q3 - First Responder Fractile Report**  
**(Phone pickup to First Unit Arrival)**  
**EMS Priority 1 & 2 incidents**

Location	Case base	% arriving within 08:15 minutes	90th percentile for quarter		
			Current	1 Yr ago	2 Yrs ago
ESD01 North Lake Travis	95	47%	14:29	15:24	13:36
ESD02 Pflugerville	442	83%	08:54	09:01	09:29
ESD03 Oak Hill	82	85%	08:38	10:37	10:22
ESD04	71	55%	13:18	12:53	13:00
ESD05 Manchaca	42	71%	10:38	10:03	11:34
ESD06 Lake Travis FR	198	80%	10:22	11:28	10:19
ESD08 Pedernales	25	72%	11:11	12:10	12:31
ESD09 Westlake	42	90%	08:03	08:43	08:15
ESD10 Ce-Bar	20	90%	08:14	06:44	07:49
ESD11 Travis County FR	138	63%	10:20	12:04	14:27
ESD12 Manor	131	52%	13:22	15:19	12:40
ESD13 Elgin	14	0%	14:00	--	--
ESD14 Volente	11	45%	11:03	15:28	09:15
<b>County - City comparison</b>					
All ESDs	1,311	72%	11:09	11:17	11:55
AFD	7,799	87%	08:47	08:33	08:51
County-wide	9,110	85%	09:09	08:59	09:21
<b>Travis County ESDs By Region</b>					
East	649	72%	11:26	10:16	11:15
South	180	65%	10:25	11:31	13:47
West	374	82%	09:52	11:12	10:45
Northwest	108	47%	13:49	15:25	13:24
<b>Case base excludes:</b>					
<ul style="list-style-type: none"> <li>- Incidents where calltaking was performed by agency other than EMS</li> <li>- Incidents where EMS was already onscene before First responder assigned to call</li> <li>- Test and duplicate calls, per EMS cancel reason</li> <li>- Incidents where no units were assigned and/or no arrival times recorded.</li> </ul>					
<b>NOTES:</b> Locations are based on EMS jurisdiction codes. For FY11 and FY12, unit stage time was substituted for arrival time if the first-in unit had a stage timestamp greater or equal to enroute time but less than the arrival time (if any). For earlier years, unit stage time was substituted when the stage timestamp was less than the arrival time (if any). Percentiles use a calculation method (waverage) that is more accurate for small case bases than the standard method.					

# EMS Advisory Board

## Cardiac Arrest Survival Rates (thru April 2012)

# Current CARES Sites

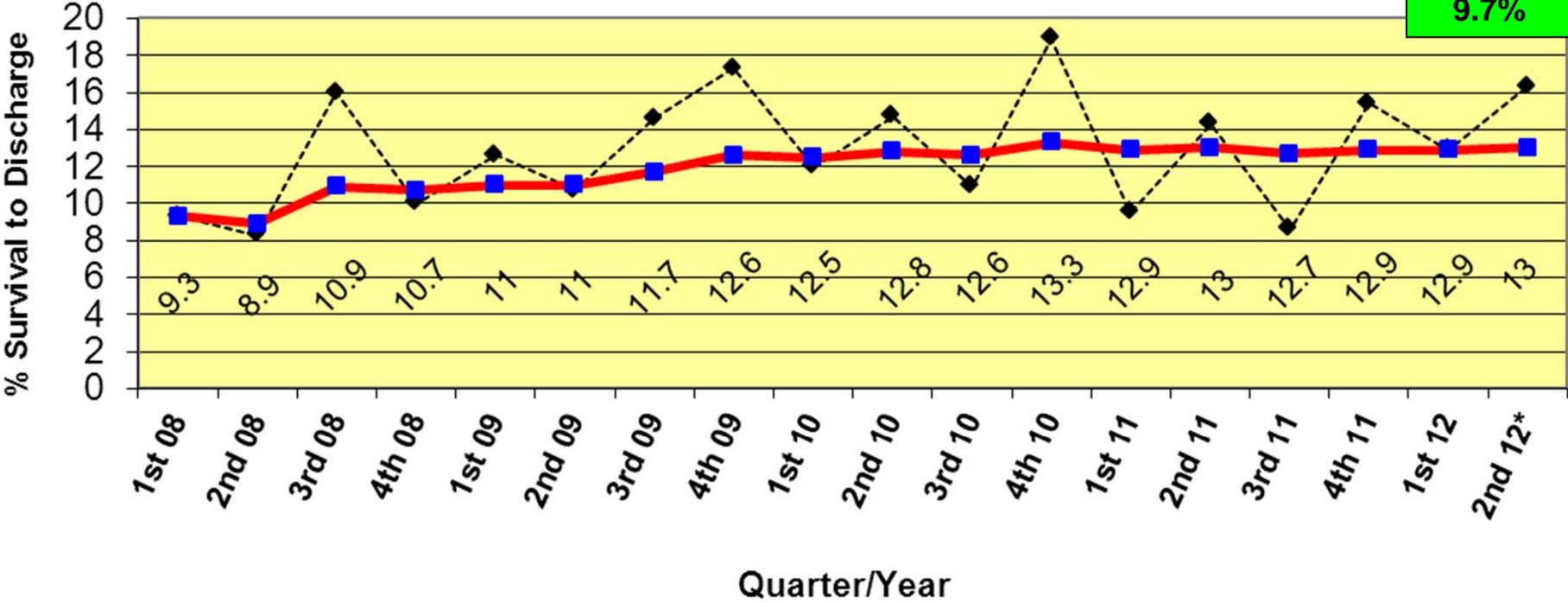
- Anchorage, AK
- Arizona (state)
- Contra Costa, CA
- San Francisco, CA
- Santa Barbara, CA
- San Diego, CA
- Ventura County, CA
- Colorado Springs, CO
- Denver, CO
- El Paso County, CO
- Stamford, CT
- New Castle Co., DE
- Miami, FL
- Atlanta, GA
- Kansas City, KS
- Sedgwick Co, KS
- Boston, MA
- Cambridge, MA
- Springfield, MA
- Oakland County, MI
- Kent County, MI
- Minnesota (state)
- North Carolina (state)
- Las Vegas, NV
- Reno, NV
- Arizona (state)
- MONOC, NJ
- Ohio (state)
- Hershey, PA
- Hilton Head, SC
- Sioux Falls, SD
- Nashville, TN
- Austin, TX
- Baytown, TX
- Fort Worth, TX
- Houston, TX
- Plano, TX
- Richmond, VA

# Definitions

- CARES – a national out of hospital cardiac arrest registry based at Emory University; it only includes patients who have an out of hospital cardiac arrest that is deemed likely due to a cardiac type of problem.
- Overall Survival – the proportion of patients for whom resuscitation efforts were attempted and who survived to hospital discharge
- Utstein Survival – the proportion of patients who had a witnessed cardiac arrest (excludes EMS witnessed) and who had ventricular fibrillation as the 1<sup>st</sup> identified cardiac rhythm
- Quarterly Survival – includes cardiac arrests for the specific quarter only
- Cumulative Survival – includes all cardiac arrests since Jan 2008
- National Survival – the Overall Survival or Utstein Survival for the aggregate of all CARES site data (cumulative since Jan 2008)

# CARES Overall Survival

**National CARES 9.7%**

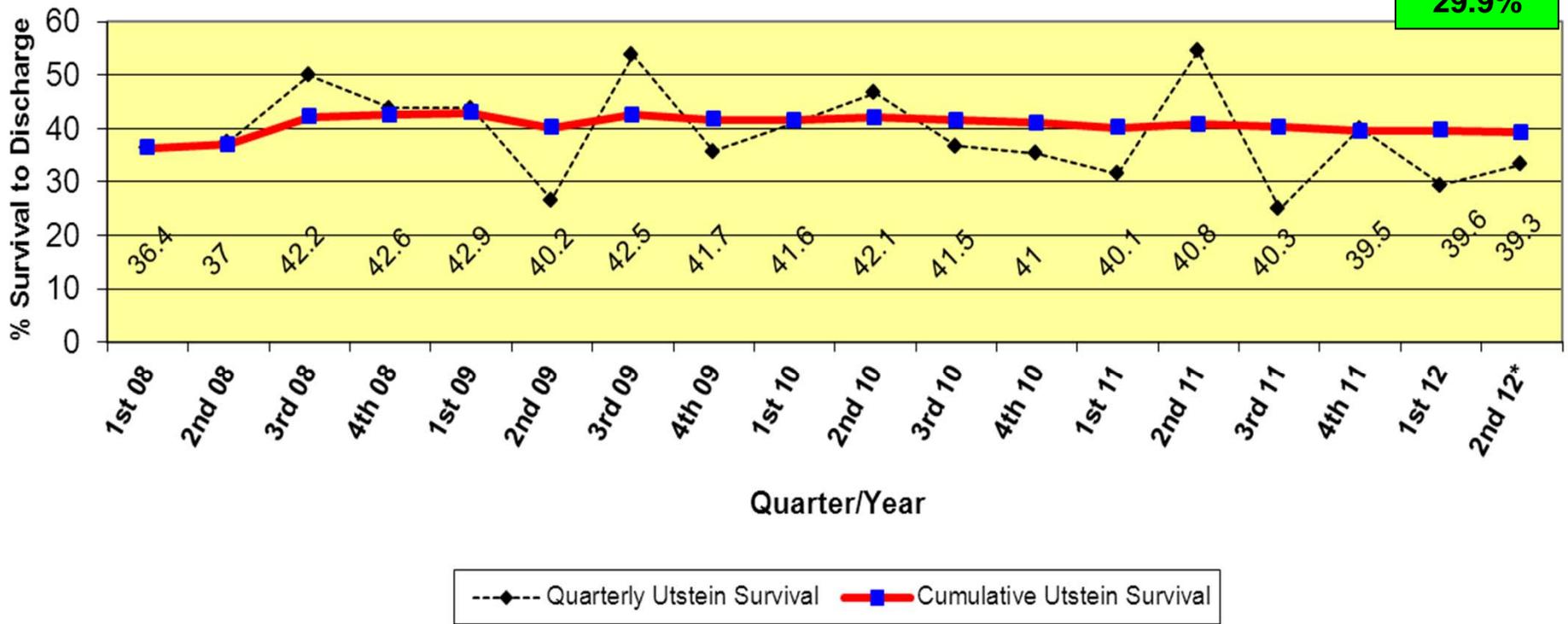


---◆--- Quarterly Overall Survival      —■— Cumulative Overall Survival

The clinical measures presented above have been approved by the EMS System Medical Director

# CARES Utstein Survival

**National CARES 29.9%**



The clinical measures presented above have been approved by the EMS System Medical Director

# **Performance Report**

## **FY2012 Q4**

# Performance Report

## Period: FY2012 Q4

<b>Quarter Summary</b>										
Calls Received: 32,694		Incidents: 29,439		Responses: 33,924		Patient Contacts: 23,964		Patient Transports: 19,546		
<b>Priority 1</b>		<b>Priority 2</b>		<b>Priority 3</b>		<b>Priority 4</b>		<b>Priority 5</b>		
Patients in need of time critical interventions		Patients with conditions that could require time critical interventions		Patients with conditions that are emergent but do not require time critical interventions.		Patients with conditions that are urgent but do not require time critical interventions.		Patients with conditions that are not time sensitive.		
Incidents	1,970	Incidents	8,534	Incidents	3,994	Incidents	11,144	Incidents	3,797	
Responses	2,683	Responses	9,895	Responses	4,476	Responses	12,624	Responses	4,246	
Patient Contacts	1,723	Patient Contacts	1,564	Patient Contacts	7,230	Patient Contacts	3,787	Patient Contacts	3,362	
Patient Transports	1,300	Patient Transports	6,155	Patient Transports	3,265	Patient Transports	5,976	Patient Transports	2,850	
<b>Patient Transport Rate</b>	<b>83.12%</b>	<b>Patient Transport Rate</b>	<b>85.13%</b>	<b>Patient Transport Rate</b>	<b>86.22%</b>	<b>Patient Transport Rate</b>	<b>74.50%</b>	<b>Patient Transport Rate</b>	<b>84.77%</b>	
<b>Response Time Performance</b>										
Urban	(09:59)	Urban	(11:59)	Urban	(13:59)	Urban	(15:59)	Urban	(17:59)	
<i>All Responders</i>	98.10%	<i>All Responders</i>	99.32%	<i>All Responders</i>	99.64%	<i>All Responders</i>	99.06%	<i>All Responders</i>	97.27%	
ATCEMS	91.14%	ATCEMS	95.78%	ATCEMS	97.63%	ATCEMS	98.74%	ATCEMS	96.76%	
Suburban	(11:59)	Suburban	(13:59)	Suburban	(15:59)	Suburban	(17:59)	Suburban	(19:59)	
<i>All Responders</i>	79.04%	<i>All Responders</i>	90.52%	<i>All Responders</i>	94.24%	<i>All Responders</i>	96.67%	<i>All Responders</i>	96.83%	
ATCEMS	52.12%	ATCEMS	74.66%	ATCEMS	81.99%	ATCEMS	92.72%	ATCEMS	88.43%	
<b>System Response Time Indicator</b> = $\left( \frac{\text{Total On-Time Count}}{\text{Total Incidents}} \right) =$						<b>98.40%</b>				
								<b>Overall Patient Transport Rate</b>		<b>81.56%</b>

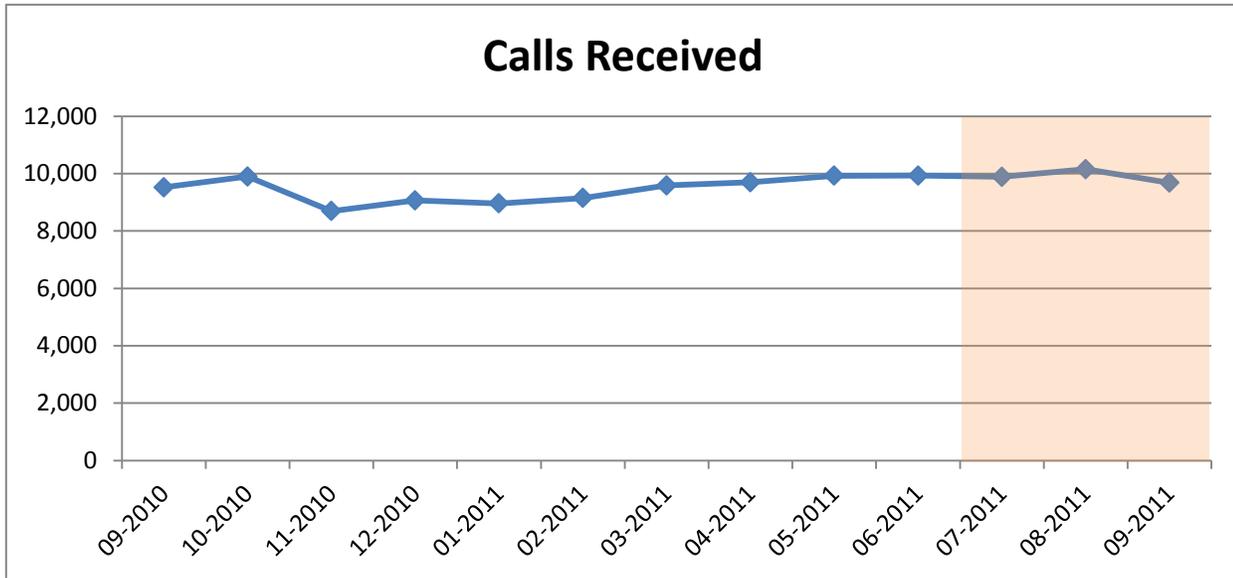
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# Communications Report

## FY2012 Q4

	Jul-12	Aug-12	Sep-12
<b>Calls Received</b>	10,796	11,102	10,796



### Overall Compliance with Medical Priority Dispatch Evaluation Criteria

Jul-12	Aug-12	Sep-12
98.53%	98.66%	98.63%

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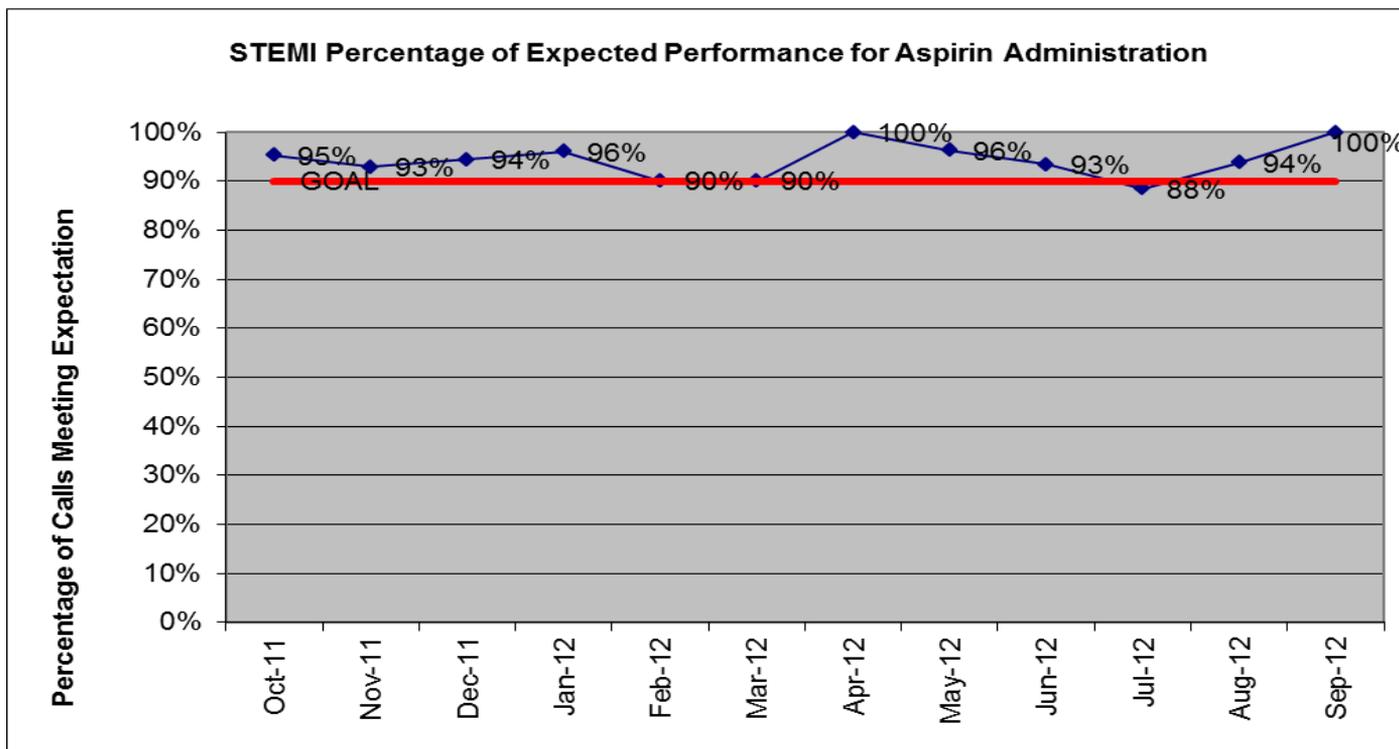
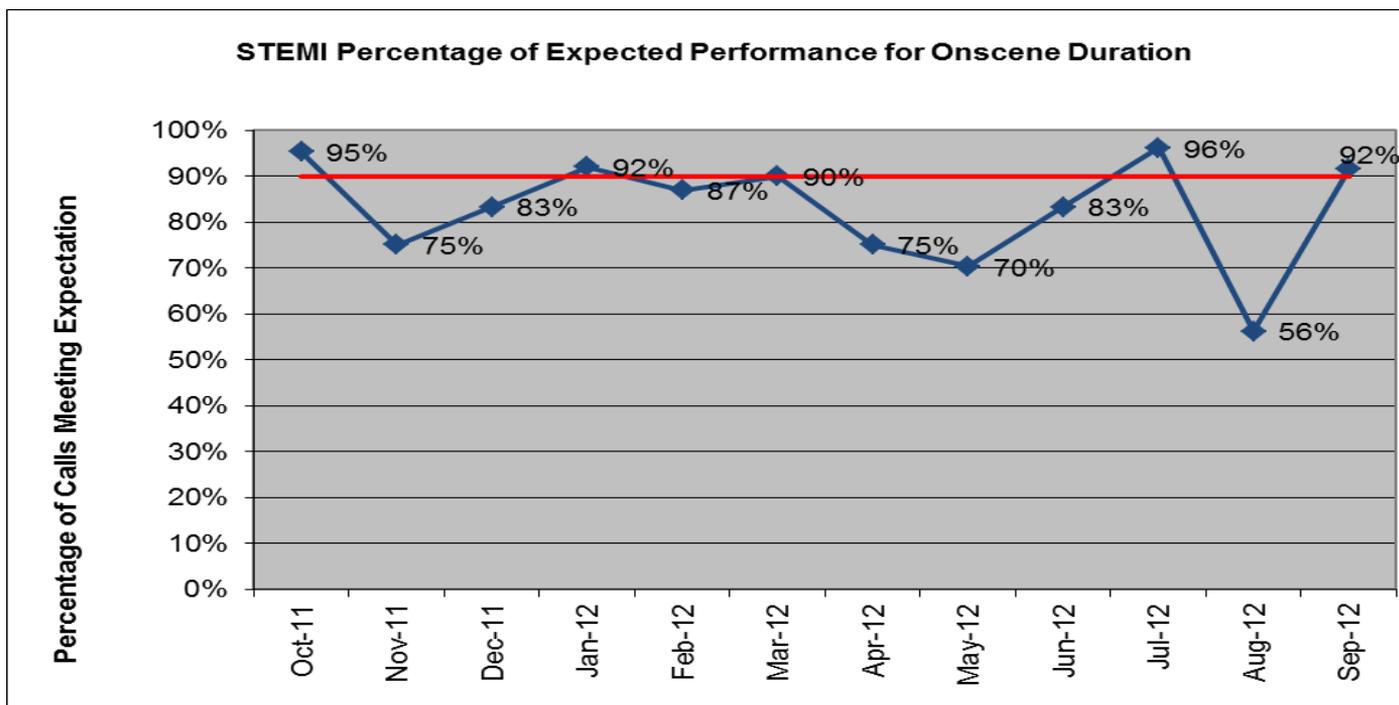
### ATCEMS Performance Measures

- Scene Time Compliance – Goal is 15 minutes
- Aspirin administration

# STEMI Report

## FY2012 Q4

	Jul-12	Aug-12	Sep-12
Patient Contacts	26	16	24
Scene Time Compliance	96.00%	56.00%	92.00%
ASA Administration	88.00%	94.00%	100.00%



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## Performance Measure Summary

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There are two types of stroke:

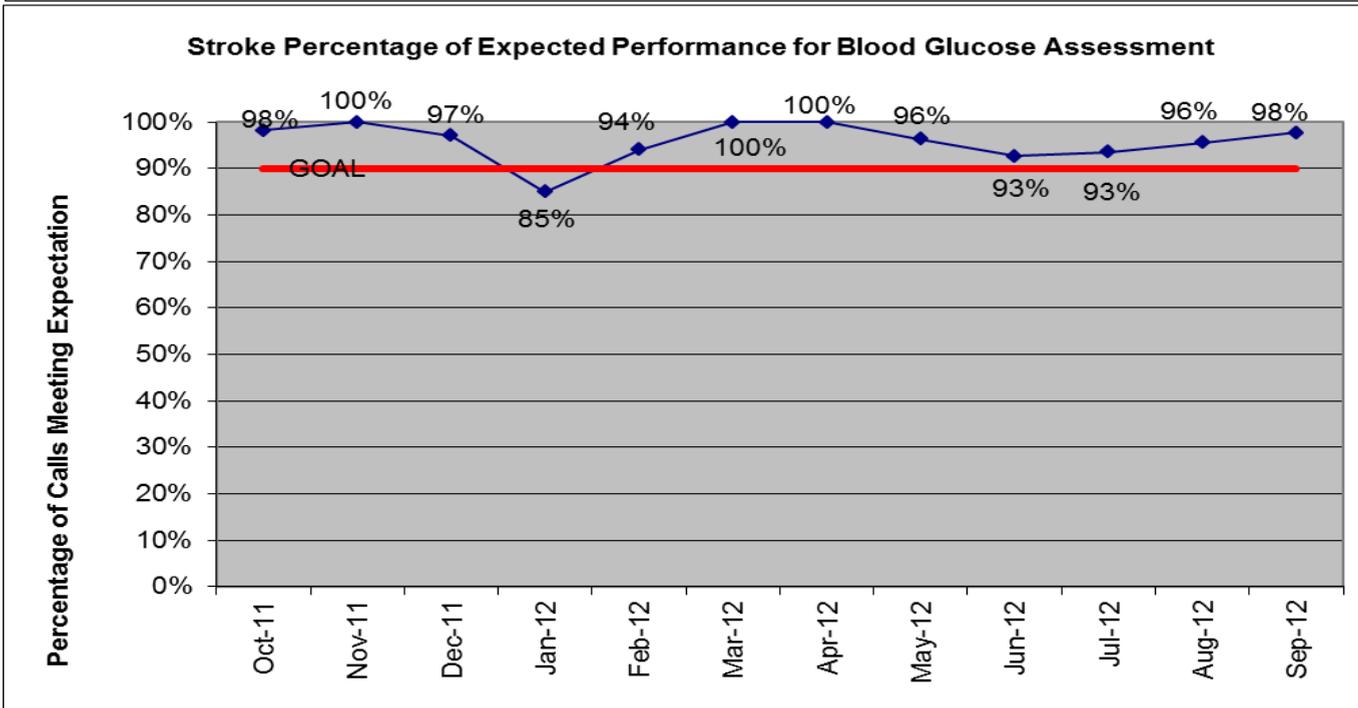
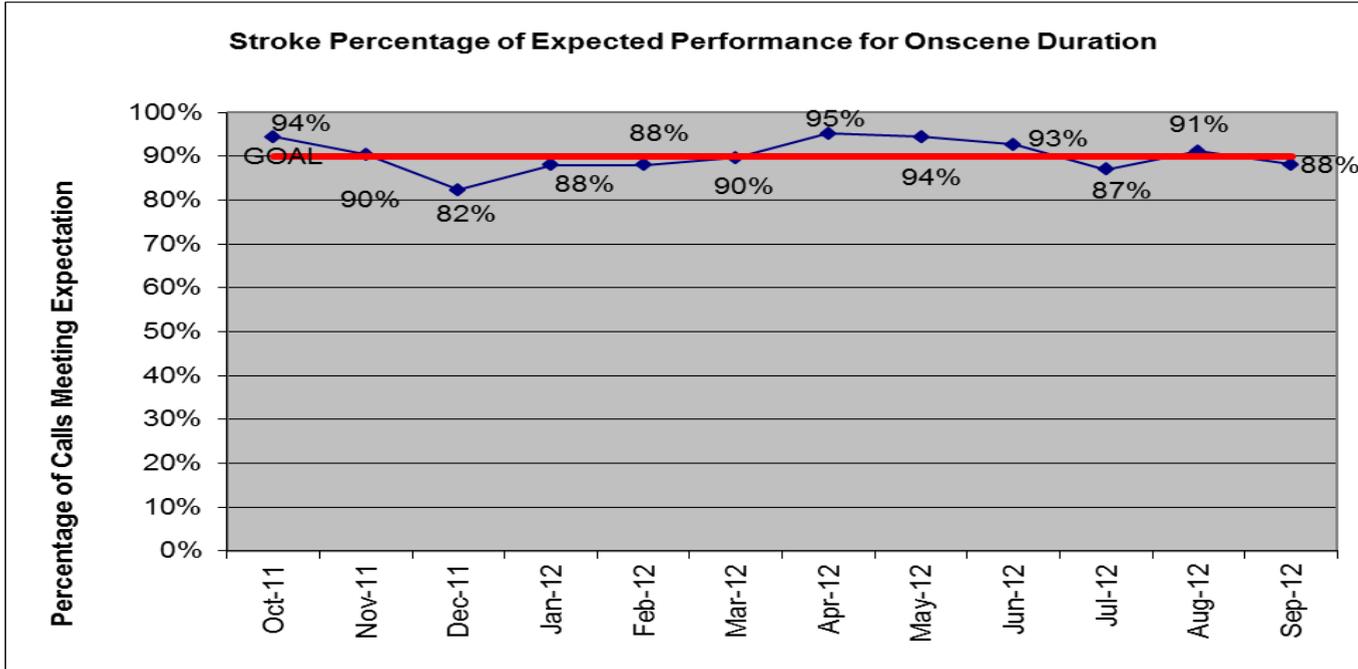
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### ATCEMS Performance Measures

- Scene time compliance – Goal is 15 minutes
- Blood glucose assessment

# Stroke Report FY2012 Q4

	Jul-12	Aug-12	Sep-12
Patient Contacts	46	45	42
Scene Time Compliance	87.00%	91.00%	88.00%
BG Determination	93.00%	96.00%	98.00%



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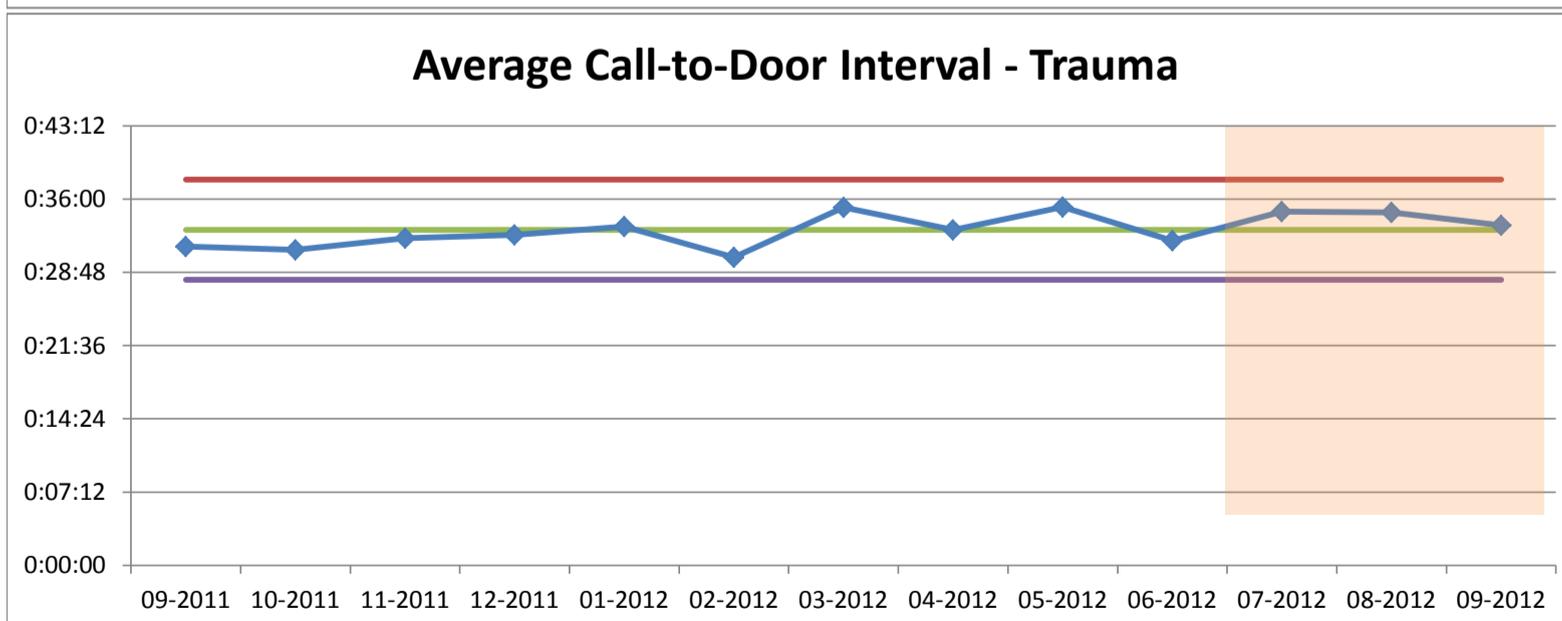
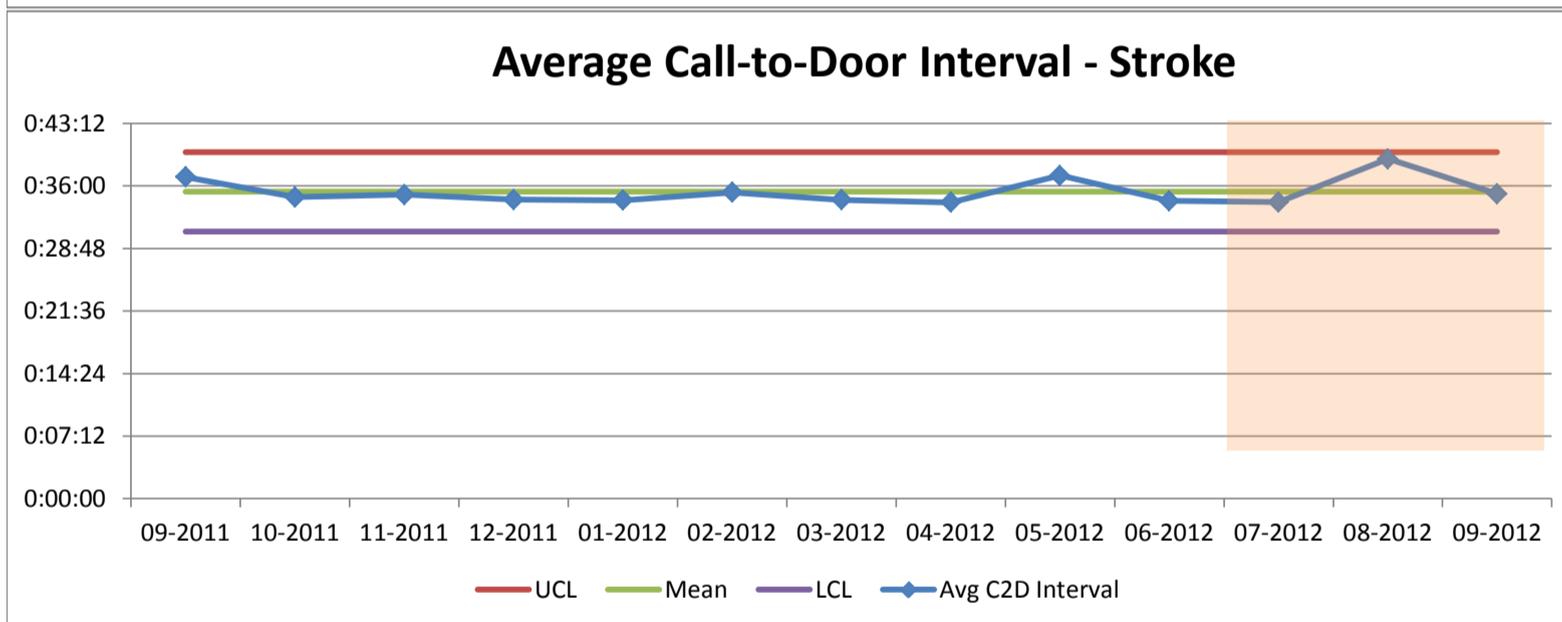
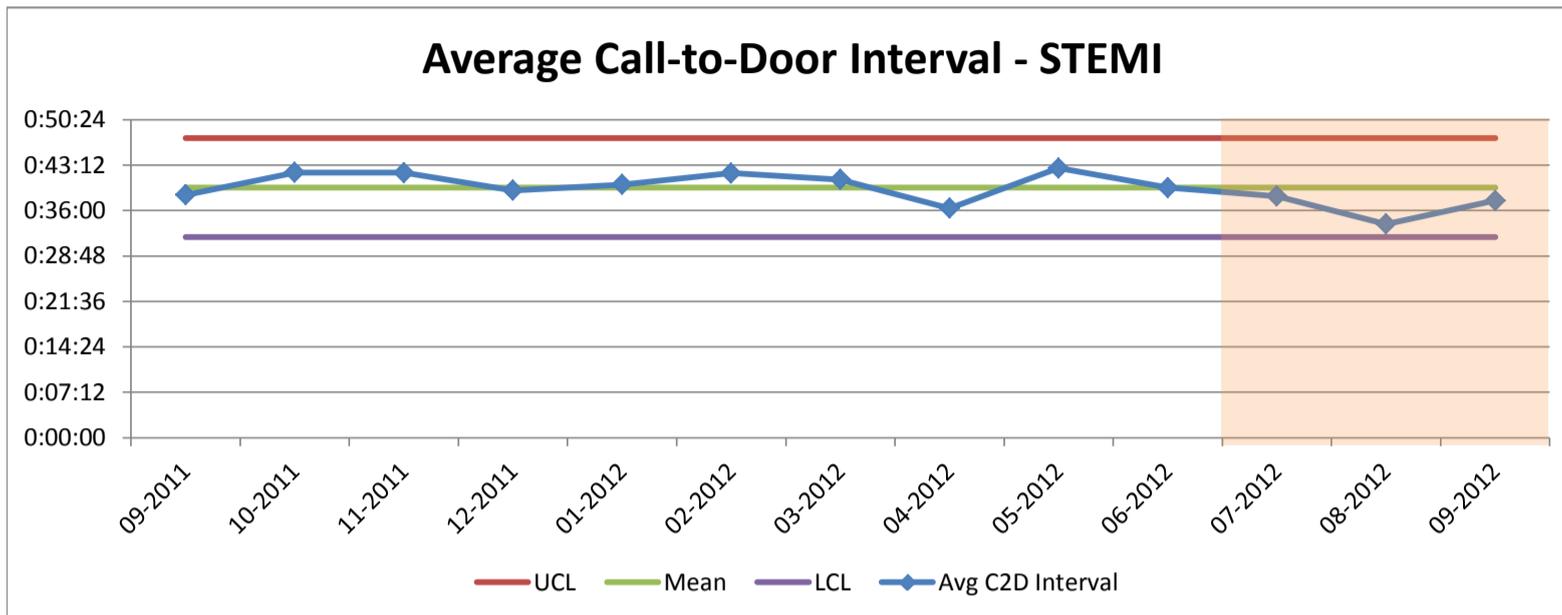
## ATCEMS Performance Measures

- STEMI – Call to door interval
- Stroke – Call to door interval
- Trauma - Call to door interval

# Customer Satisfaction Report

## FY2012 Q4

	Jul-12	Aug-12	Sep-12
Avg Call to Door Interval - STEMI	0:38:18	0:33:53	0:37:36
Avg Call to Door Interval - Stroke	0:34:27	0:39:06	0:35:06
Avg Call to Door Interval - Trauma	0:34:47	0:34:42	0:33:24



**FY12 Q4 - First Responder Fractile Report  
(From EMS Phone pickup to Fire First Unit Arrival)  
EMS Priority 1 & 2 incidents**

Location	Case base	% arriving within 08:15 minutes	90th percentile for quarter		
			Current	1 Yr ago	2 Yrs ago
ESD01 North Lake Travis	90	44%	14:51	16:34	14:09
ESD02 Pflugerville	450	82%	09:19	09:15	09:08
ESD03 Oak Hill	62	85%	08:47	08:36	08:02
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ESD06 Lake Travis FR	196	82%	09:29	11:43	09:49
ESD08 Pedernales	29	55%	13:09	16:34	11:31
ESD09 Westlake	43	81%	09:10	08:10	09:41
ESD10 Ce-Bar	16	75%	14:29	08:43	08:42
ESD11 Travis County FR	164	66%	10:32	11:19	16:48
ESD12 Manor	124	50%	13:07	12:57	12:02
ESD13 Elgin	16	6%	18:31	--	--
ESD14 Volente	9	33%	11:23	13:26	11:23
<b>County - City comparison</b>					
All ESDs	1,314	71%	11:11	11:21	11:27
AFD	7,676	87%	08:43	08:30	08:42
County-wide	8,990	85%	09:07	08:54	09:11
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East	643	72%	10:53	10:25	10:33
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<b>Case base excludes:</b>					
<ul style="list-style-type: none"> <li>- Incidents where calltaking was performed by agency other than EMS</li> <li>- Incidents where EMS was already onscene before First responder assigned to call</li> <li>- Test and duplicate calls, per EMS cancel reason</li> <li>- Incidents where no units were assigned and/or no arrival times recorded.</li> </ul>					
<b>NOTES:</b> Locations are based on EMS jurisdiction codes. For FY11 and FY12, unit stage time was substituted for arrival time if the first-in unit had a stage timestamp greater or equal to enroute time but less than the arrival time (if any). For earlier years, unit stage time was substituted when the stage timestamp was less than the arrival time (if any). Percentiles use a calculation method (waverage) that is more accurate for small case bases than the standard method.					

# EMS Advisory Board

## Cardiac Arrest Survival Rates

(thru July 2012)

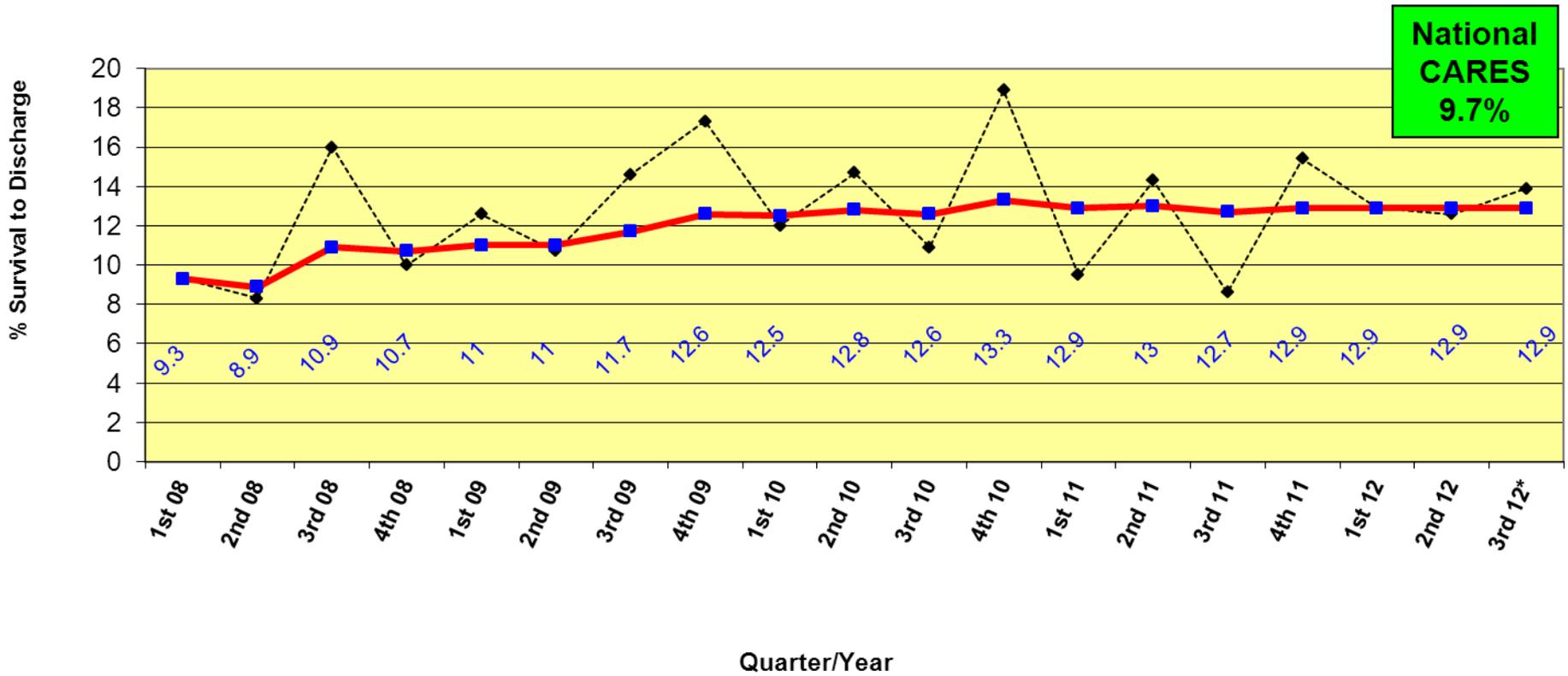
# Current CARES Sites

- Anchorage, AK
- Arizona (state)
- Contra Costa, CA
- San Francisco, CA
- Santa Barbara, CA
- San Diego, CA
- Ventura County, CA
- Colorado Springs, CO
- Denver, CO
- El Paso County, CO
- Stamford, CT
- New Castle Co., DE
- Miami, FL
- Atlanta, GA
- Kansas City, KS
- Sedgwick Co, KS
- Boston, MA
- Cambridge, MA
- Springfield, MA
- Oakland County, MI
- Kent County, MI
- Minnesota (state)
- North Carolina (state)
- Las Vegas, NV
- Reno, NV
- Arizona (state)
- MONOC, NJ
- Ohio (state)
- Hershey, PA
- Hilton Head, SC
- Sioux Falls, SD
- Nashville, TN
- Austin, TX
- Baytown, TX
- Fort Worth, TX
- Houston, TX
- Plano, TX
- Richmond, VA

# Definitions

- CARES – a national out of hospital cardiac arrest registry based at Emory University; it only includes patients who have an out of hospital cardiac arrest that is deemed likely due to a cardiac type of problem.
- Overall Survival – the proportion of patients for whom resuscitation efforts were attempted and who survived to hospital discharge
- Utstein Survival – the proportion of patients who had a witnessed cardiac arrest (excludes EMS witnessed) and who had ventricular fibrillation as the 1<sup>st</sup> identified cardiac rhythm
- Quarterly Survival – includes cardiac arrests for the specific quarter only
- Cumulative Survival – includes all cardiac arrests since Jan 2008
- National Survival – the Overall Survival or Utstein Survival for the aggregate of all CARES site data (cumulative since Jan 2008)

# CARES Overall Survival

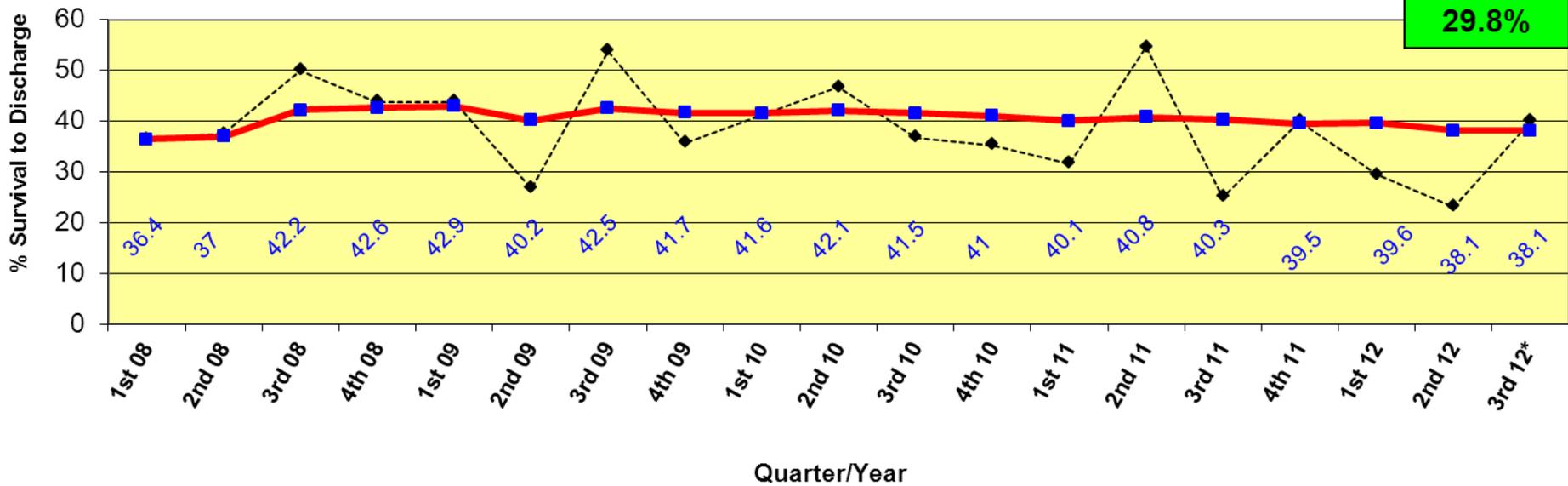


\* Indicates incomplete quarter

The clinical measures presented above have been approved by the EMS System Medical Director

# CARES Utstein Survival

**National CARES 29.8%**



---◆--- Quarterly Utstein Survival      —■— Cumulative Utstein Survival

\* Indicates incomplete quarter

The clinical measures presented above have been approved by the EMS System Medical Director

**Performance Report  
FY2012 - End of Year**

# Performance Report

Period: **FY2012**

## Fiscal Year Summary

Calls Received: 122,049

Incidents: 111,327

Responses: 128,334

Patient Contacts: 91,769

Patient Transports: 75,510

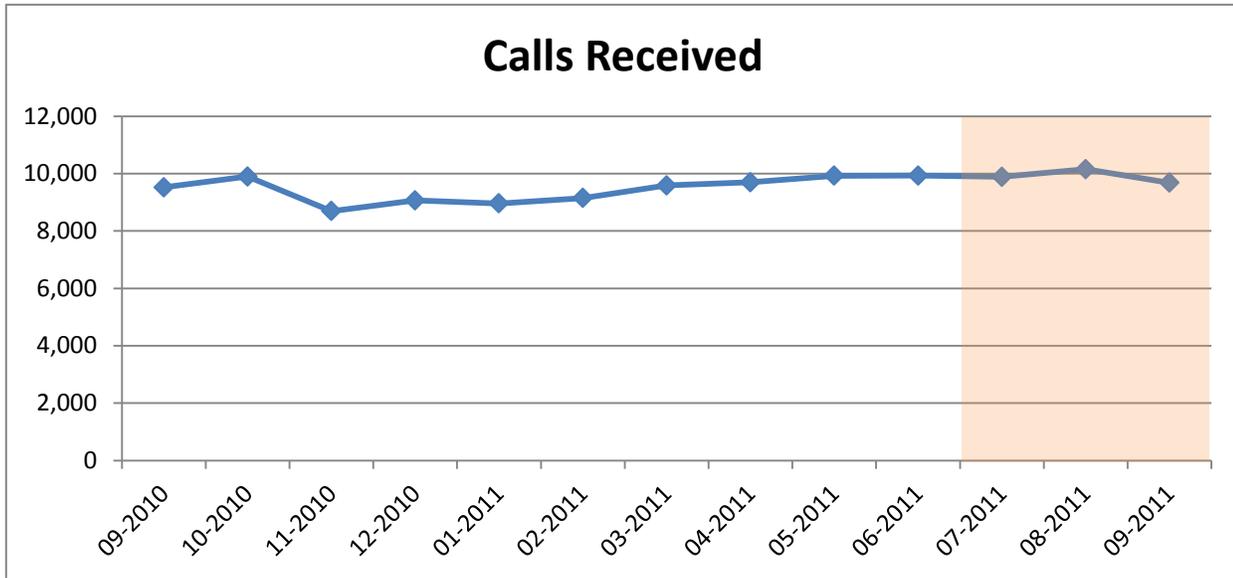
<b>Priority 1</b>		<b>Priority 2</b>		<b>Priority 3</b>		<b>Priority 4</b>		<b>Priority 5</b>	
Patients in need of time critical interventions		Patients with conditions that could require time critical interventions		Patients with conditions that are emergent but do not require time critical interventions.		Patients with conditions that are urgent but do not require time critical interventions.		Patients with conditions that are not time sensitive.	
Incidents	7,634	Incidents	32,002	Incidents	15,469	Incidents	41,797	Incidents	14,425
Responses	10,562	Responses	37,027	Responses	17,205	Responses	47,240	Responses	16,300
Patient Contacts	6,182	Patient Contacts	27,689	Patient Contacts	14,747	Patient Contacts	30,350	Patient Contacts	12,801
Patient Transports	5,299	Patient Transports	23,709	Patient Transports	12,710	Patient Transports	22,916	Patient Transports	10,876
<b>Patient Transport Rate</b>	<b>85.72%</b>	<b>Patient Transport Rate</b>	<b>85.63%</b>	<b>Patient Transport Rate</b>	<b>86.19%</b>	<b>Patient Transport Rate</b>	<b>75.51%</b>	<b>Patient Transport Rate</b>	<b>84.96%</b>
<b>Response Time Performance</b>									
Urban	(09:59)	Urban	(11:59)	Urban	(13:59)	Urban	(15:59)	Urban	(17:59)
All Responders	97.97%	All Responders	99.20%	All Responders	99.57%	All Responders	98.96%	All Responders	96.63%
ATCEMS	91.25%	ATCEMS	95.81%	ATCEMS	97.56%	ATCEMS	98.65%	ATCEMS	95.99%
Suburban	(11:59)	Suburban	(13:59)	Suburban	(15:59)	Suburban	(17:59)	Suburban	(19:59)
All Responders	82.21%	All Responders	91.97%	All Responders	95.36%	All Responders	96.66%	All Responders	96.95%
ATCEMS	60.36%	ATCEMS	76.03%	ATCEMS	83.67%	ATCEMS	92.95%	ATCEMS	88.37%
<b>System Response Time Indicator</b> = $\left( \frac{\text{Total On-Time Count}}{\text{Total Incidents}} \right)$ = <b>98.31%</b>							<b>Overall Patient Transport Rate</b> <b>82.28%</b>		

- Notes: 1) Analysis limited to Priority 1-5 incidents that take place within the City of Austin or Travis County.  
 2) Incidents that occur outside the county (i.e. mutual aid incidents) are excluded.  
 3) Stand-bys (Priority 6) and other priority levels are excluded.

This report is prepared by the A/TCEMS Business Analysis and Research Team. For official reports please contact the A/TCEMS Business Analysis and Research Team at [EMSDDataAnalysis@austintexas.gov](mailto:EMSDDataAnalysis@austintexas.gov).

# Communications Report FY2012

FY2012  
Calls Received 122,049



## Overall Compliance with Medical Priority Dispatch Evaluation Criteria

FY2012  
98.00%

*This report contains working data for internal use only. No warranty is made by A/TCEMS regarding accuracy.  
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## Performance Measure Summary

### STEMI

ST Segment Myocardial Infarction (STEMI) is myocardial Infarction (MI) with an electrocardiographic finding of ST segment elevation. MI is caused by an interruption of blood flow to one or more areas of the heart. The most common cause is a rupture of an atherosclerotic plaque which causes obstruction of coronary vessels. Each year, about 1.5 million people suffer a myocardial infarction. It is the leading causes of death in the United States and kills approximately 500,000 people. In 2010, the CDC estimates that heart disease will cost the United States \$316 billion dollars.

### ATCEMS Performance Measures

- Scene Time Compliance – Goal is 15 minutes
- Aspirin administration

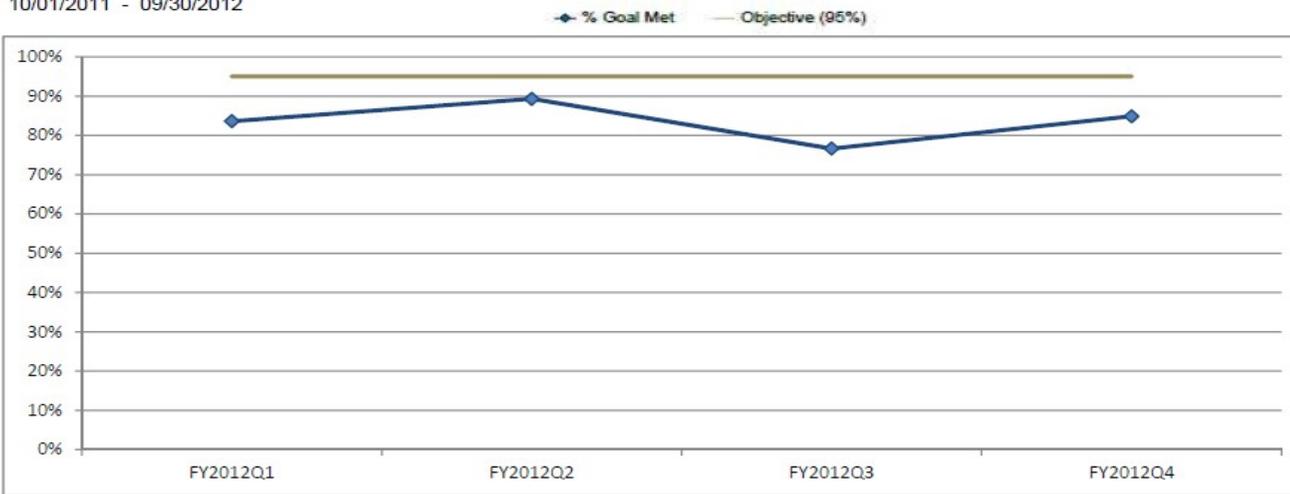
# STEMI Report FY2012

	Q1	Q2	Q3	Q4
Patient Contacts	67	84	77	66
Scene Time Compliance	83.58%	89.29%	76.62%	84.85%
ASA Administration	94.03%	90.48%	96.10%	92.42%

## Scene Time Interval for STEMI Patients

ATCEMS Advisory Board Report

10/01/2011 - 09/30/2012



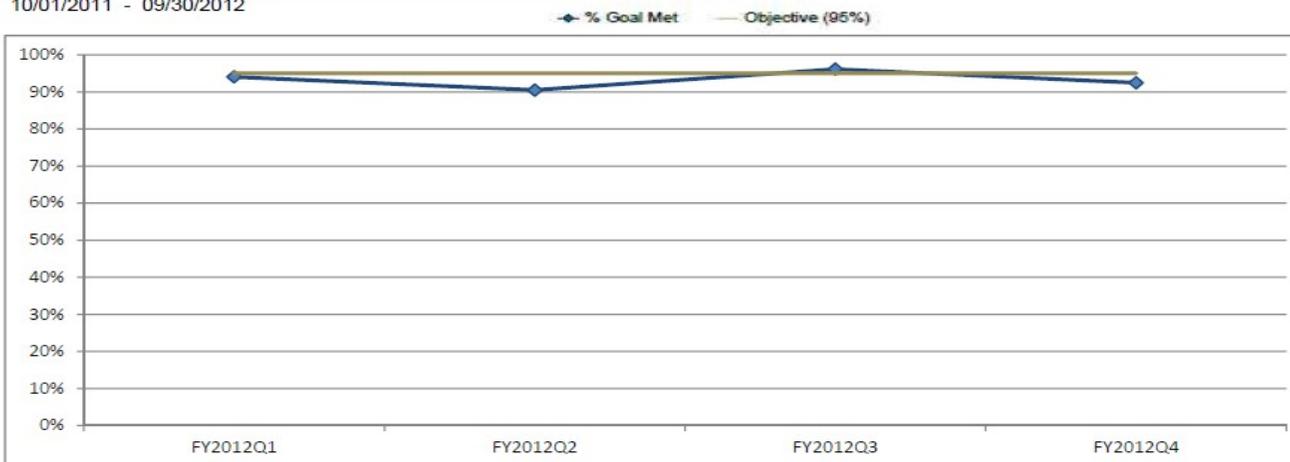
Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q1	67	56	83.58%
2012	2012-Q2	84	75	89.29%
2012	2012-Q3	77	59	76.62%
2012	2012-Q4	66	56	84.85%

Austin-Travis County EMS

## Aspirin Administration in STEMI Alert Patients

ATCEMS Advisory Board Report

10/01/2011 - 09/30/2012



Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q1	67	63	94.03%
2012	2012-Q2	84	76	90.48%
2012	2012-Q3	77	74	96.10%
2012	2012-Q4	66	61	92.42%

Austin-Travis County EMS



## Performance Measure Summary

### Stroke

A stroke is the loss of neurologic function due to alterations or disturbances in the blood supply to the brain. When blood flow is stopped for more than a few seconds, brain cells begin to die, causing permanent damage. Each year, about 795,000 people suffer a stroke. It is the third leading cause of death in the United States and kills 143,579 people each year and is the leading cause of serious, long-term disability. The total cost of stroke to the United States is estimated at \$43 billion dollars.

There are two types of stroke:

- Ischemic – Ischemic stroke occurs when a blood vessel becomes obstructed and interrupts blood supply. 87% of strokes are classified as ischemic.
- Hemorrhagic – Hemorrhagic strokes are caused by a ruptured blood vessel or abnormal vasculature. This type of stroke accounts for nearly 30% of all stroke deaths.

### ATCEMS Performance Measures

- Scene time compliance – Goal is 15 minutes
- Blood glucose assessment

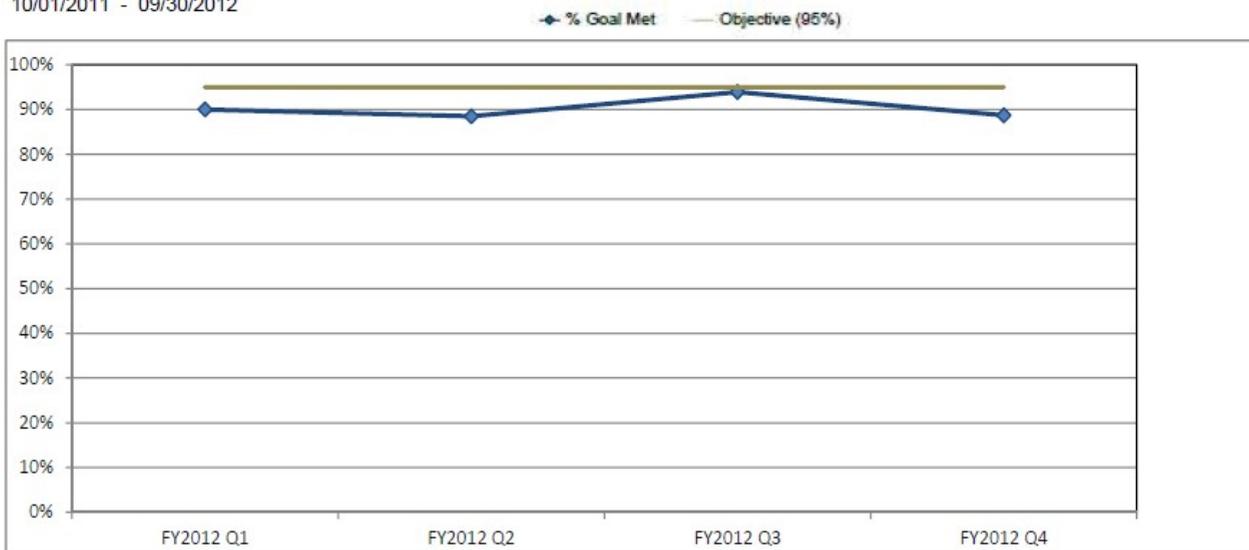
# Stroke Report FY2012 Q3

	Q1	Q2	Q3	Q4
<b>Patient Contacts</b>	140	139	148	133
<b>Scene Time Compliance</b>	90.00%	88.49%	93.92%	88.72%
<b>BG Determination</b>	98.57%	96.40%	93.92%	94.74%

## Scene Time Interval for Stroke Alert Patients

ATCEMS Advisory Board Report

10/01/2011 - 09/30/2012



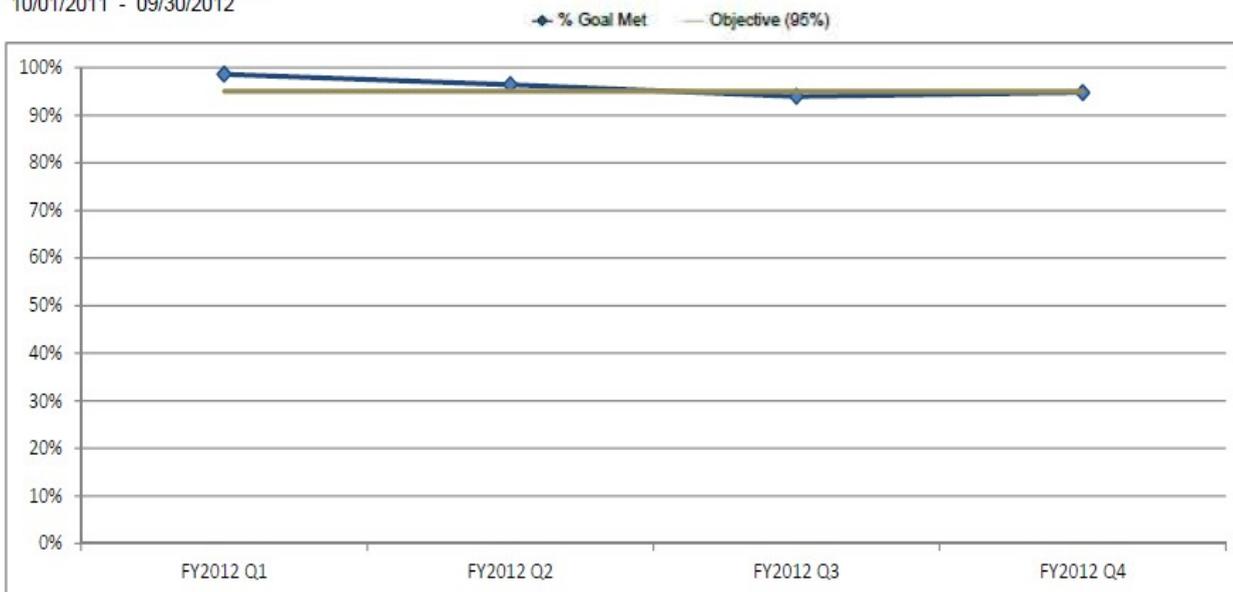
Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q1	140	126	90.00%
2012	2012-Q2	139	123	88.49%
2012	2012-Q3	148	138	93.92%
2012	2012-Q4	133	118	88.72%

Austin-Travis County EMS

## Blood Glucose Level in Stroke Alert Patients

ATCEMS Advisory Board Report

10/01/2011 - 09/30/2012



Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2012	2012-Q1	140	138	98.57%
2012	2012-Q2	139	134	96.40%
2012	2012-Q3	148	139	93.92%
2012	2012-Q4	133	126	94.74%

Austin-Travis County EMS



# Performance Measure Summary

## Customer Satisfaction

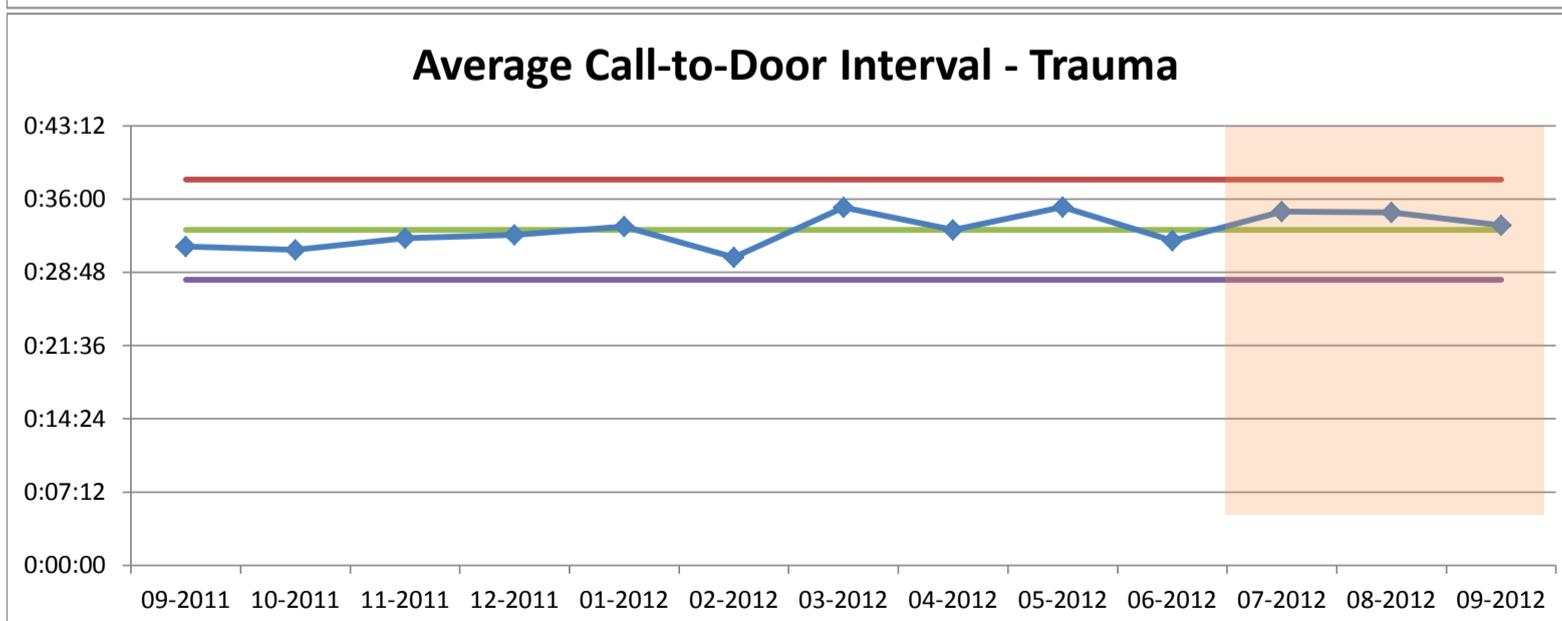
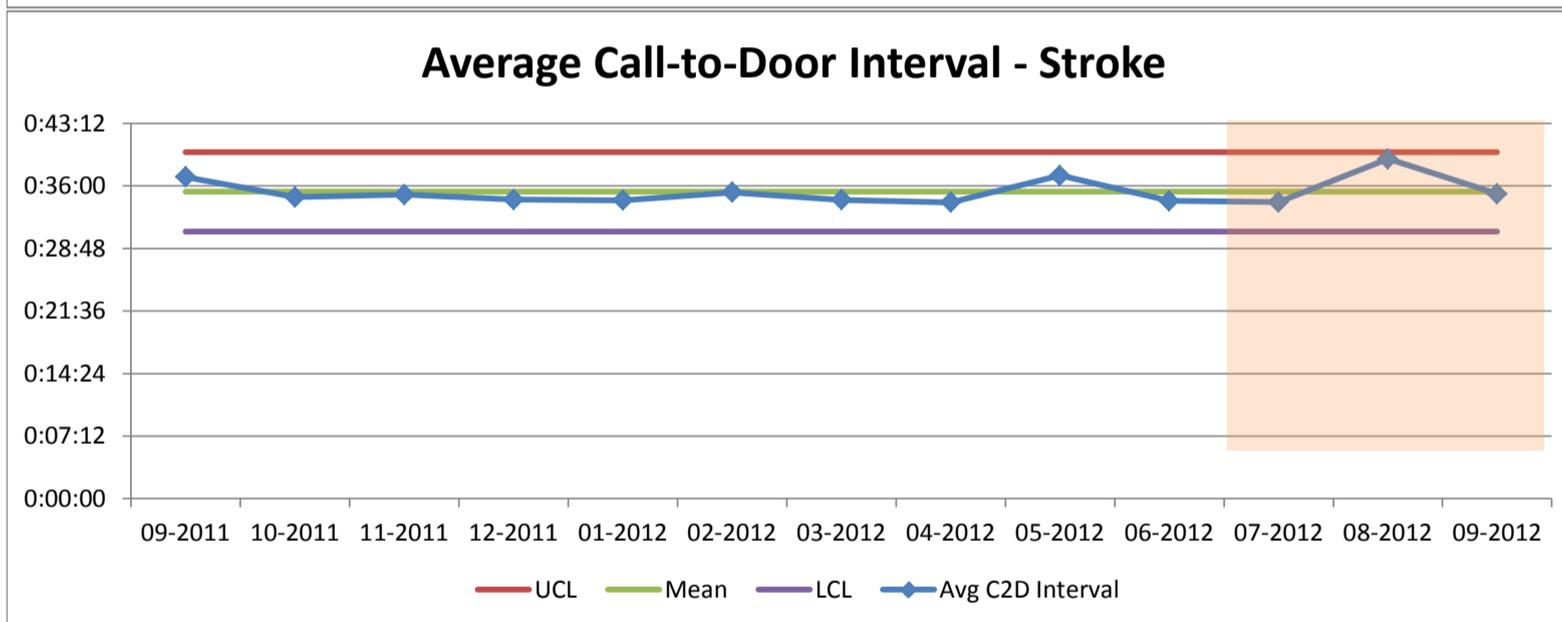
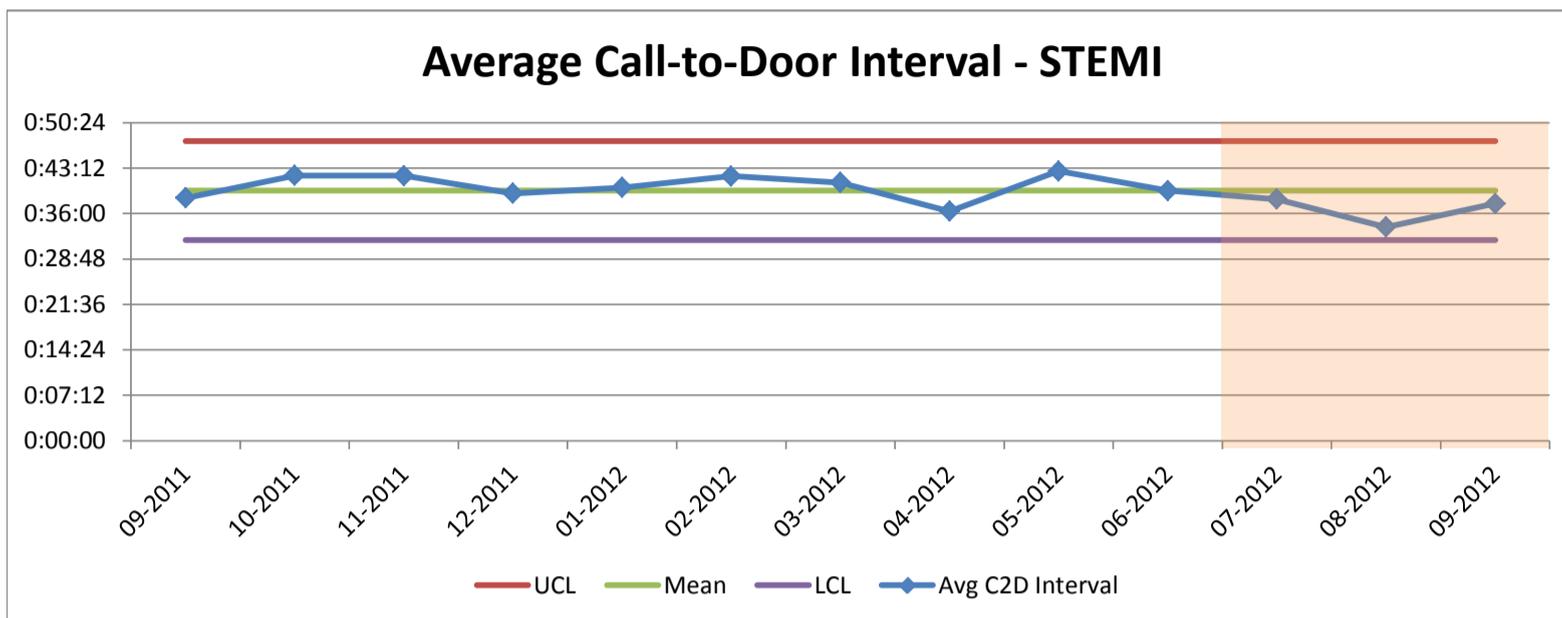
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## ATCEMS Performance Measures

- STEMI – Call to door interval
- Stroke – Call to door interval
- Trauma - Call to door interval

# Customer Satisfaction Report FY2012

	<b>FY2012</b>
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<b>Avg Call to Door Interval - Stroke</b>	00:35:23
<b>Avg Call to Door Interval - Trauma</b>	00:31:03



**FY12 Q4 - First Responder Fractile Report  
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